

OFFICIAL REPORTS OF SOCIETIES

IN CHARGE OF
MARY E. THORNTON

NATIONAL COUNCIL OF WOMEN

THE committee is in receipt of a letter from the president, Mrs. Fannie Humphreys Gaffney, announcing that the National Council of Women, through its Board of Officers, bids the American Federation of Graduate Nurses welcome, and admits the association to membership at once.

It is hoped that many items concerning the Council and its work will appear in the JOURNAL from time to time.

NEW YORK ASSOCIATIONS UNITE

THE Alumnae Associations of Bellevue, New York, Post-Graduate, Presbyterian, Roosevelt, and St. Luke's have united in forming a programme of study for the months of February and March. On Wednesday, February 6, an interesting clinic was given by Dr. Elliot at the Presbyterian Hospital. On February 13 the members met at St. Luke's Hospital, and on February 20 at the residence of the St. Luke's graduates, 154 West Forty-fifth Street, at three-thirty P.M. On February 27 they met at the Post-Graduate Club, 143 East Thirty-fifth Street, at two P.M. A visit to municipal institutions had been arranged for that day.

BELLEVUE ALUMNÆ ASSOCIATION

THIS Association held its annual business meeting on January 17. The officers elected for 1901 are: Miss Annie Schenck, president; Miss L. L. Dock, vice-president; Miss E. M. Reading, second vice-president; Miss May Bohling, treasurer, and Miss Lida Perkins, secretary. The secretary in her report gave the membership at one hundred and forty-seven. This annual report tells of the organization of an Alumnae Association of the Woman's and Child's Hospital at San Francisco by Miss Huffcut, the superintendent. This is the first of its kind west of the Rockies. Miss Huffcut is to be congratulated, as she reports it to be in a flourishing condition. Miss Huffcut had been elected secretary of her

own alumnae for 1900, but was obliged, greatly to the regret of the members, to resign in order to take her present position. Miss Betts and Miss Tackel are still in the Philippines. Miss Gertrude Moore is engaged in organizing a hospital in Havana. Miss Turner is also in Havana. Miss Starr has given us several very interesting talks upon her experiences in the Philippines, and Miss MacVean upon her trip to South Africa, including her visit to Windsor and presentation to the Queen.

Though our club-house has not yet materialized, we still have hope. Some money is in hand that could be devoted to the furnishing and more is promised for the same purpose. What we need to start the ball rolling is a smart, capable woman of business ability, with a certain number of nurses to assist her by pledging their support for one or two years. Were it once started we feel sure there would be no difficulty in making the club a success. Sixteen new members have been added to the roll during the year, but there are many more who should be in, and we propose this year to make an effort to reach as many as we can, to show them that it is a benefit to the individual as well as to the Association, and the only way to keep up an interest in one's work.

BROOKLYN HOMŒOPATHIC ALUMNÆ

THE Alumnae Association of the Brooklyn Homœopathic Hospital Training-School for Nurses, at their regular meeting, held January 9, 1901, elected Miss Anna Park, of 363 Grand Avenue, Brooklyn, as their representative to the convention of the Associated Alumnae to be held in Buffalo, New York, next September. Miss Walker and Miss McClure acting as substitutes.

THE POST-GRADUATE

THE Post-Graduate Alumnae held its stated meeting on Tuesday, February 6, at three-thirty P.M., at the club. Six applicants were considered and admitted to membership. A donation for the sick fund was announced, and the delegate to the State organization meeting to be held at Albany was elected. The next stated meeting is to be held the first Tuesday in March.

MISS ISABEL McISAAC, president and chairman of the Congress of Nurses, wishes the announcement to be made that all nurses, whether they are members of an alumnae association or not, are asked to partici-

pate in this Congress. Every kind of an organization of nurses may send a delegate, and individual nurses who are not members of any organization are cordially invited to attend the meetings, which are to be held in Buffalo during the week commencing September 16, 1901.

THE committee appointed to take the initiatory steps towards forming a New York State organization of nurses is preparing to call a meeting in March. Due notice of this meeting will be sent by mail to the schools and societies that the committee has succeeded in reaching.

SYLVEEN V. NYE,
Chairman.

OPENINGS FOR NURSES *

As the ranks of the nursing profession are filled constantly with new recruits from the many training-schools scattered over the land, the question of employment for them becomes one of pressing importance.

Private nursing is the goal of most of these, and probably will always occupy the larger number, and it is to its development and extension that we must look for occupation for the majority of trained nurses.

The time is fast coming when we shall have to readjust our ideas as to the remuneration of nursing service, which at present places the employment of a private trained nurse beyond the means of any but the comparatively wealthy in the community. Twenty or twenty-five dollars is more than the average bread-winner earns in a week, and it is manifestly out of the question for him or her to pay this sum for a nurse when illness incapacitates him for earning anything at all.

Large cities usually have an oversupply of nurses. There is a better opening for the newly graduated nurse in the country town, where the field is not as fully occupied.

If she has no connections in a place like this, she should obtain introductions from one of the hospital physicians, or some other medical man who can certify to her good work, and with these visit the doctors of the town she has selected and ask them for work. She may have to wait for a time for an opportunity, but if she is skilful and trustworthy, she will eventually build up a remunerative practice. This is essentially true if she will devote herself to obstetric cases, as there is always a demand for the services of a thoroughly satisfactory obstetric nurse.

* Read by Elizabeth Robinson Seovil before the Third Annual Convention of the Nurses' Associated Alumnae of the United States, held at New York, May 3, 4, and 5, 1900.

If a woman wishes to remain in a large city, she may take up what has been called co-operative nursing and become a visiting nurse.

There are people living in apartments, or staying at hotels, or even in their own homes, when the means are limited, who do not require, or cannot afford, the exclusive attention of a nurse. There are special services, such as douching, catheterizing, attending to surgical dressings, giving sponge-baths or medicated baths, attendance during an operation, which require only a stated time for their performance. Many persons are glad to be able to obtain a nurse for the limited time required without being obliged to board and lodge her during the hours when she is not needed in order to have her at hand when she is. This system is particularly suited to the care of chronic invalids, who require skilled service for a short time only each day. The prices charged by one visiting nurse are as follows: Obstetrical cases, six hours or less, three dollars; surgical and obstetrical dressings, twice daily, ten dollars per week; general cases, one dollar per hour.

Cards having the prices charged with the nurse's name and address should be distributed to the doctors, placed in drug-stores, hotels, and boarding-houses, and brought before the public in any other way the nurse can devise.

It is only necessary to mention briefly the ordinary openings for the graduate nurse.

District Nursing, in which the pay is about fifty dollars per month, or thirty dollars with board and lodging included.

Hospital Service in various departments which commands salaries as varied as the service rendered, from superintending hospitals and training-schools to the headship of a ward. Service in asylums and sanatoriums may be grouped under this head. It is treated at length in papers following.

Infirmary Work. Many large private schools and some colleges have infirmaries attached to them with a trained nurse in charge who cares for the ordinary cases of illness among the students and has assistants in time of need. These positions are particularly desirable, because the long vacations give an opportunity for recuperation, or, if the nurse desires, for further work in her profession, or for additional hospital work, to keep herself abreast of the times.

Office Work. Many physicians and surgeons and a few dental surgeons employ trained nurses in their offices in the preparation of patients for examination, for minor operations, and for the administration of anæsthetics, and to keep the instruments in the perfect order that is essential to their usefulness. This service is usually well paid. A knowledge of stenography and typewriting is very useful, as the nurse

is often required to write letters from dictation. If she can add book-keeping to this, she increases the likelihood of obtaining a good position.

Private Hospitals. If a nurse has a little capital, and is a woman of executive ability, she may find her opening in the establishment of a private hospital.

Many persons who are able to pay for treatment dislike the restrictions of a public hospital, and physicians and surgeons who are not attached to a hospital staff are often glad to have a place where they can send their patients and have them under hospital care while retaining the treatment in their own hands. The good-will of a number of the medical faculty is necessary to the success of the undertaking, as the patients must come through them.

The nurse in charge is responsible for the rent and furnishing of the house, for all the running expenses, service, and ordinary nursing. Patients pay the extra fees of a special nurse when exclusive service is needed, and for medicine, stimulants, and the washing of body linen. The charge is usually from twenty dollars to fifty dollars per week, according to the size and location of the rooms occupied. A large house is indispensable.

It would seem that an obstetric hospital conducted on these lines should be a success. Great care would have to be exercised that none but irreproachable cases, sent in by reputable physicians, were admitted, that no stigma could possibly be attached to the patients using it.

In a large city a private hospital for contagious diseases, authorized by the Board of Health, might be a success. The hardship is sometimes very great when patients are removed from their homes to the public hospital for cases of contagion.

A nurse who is familiar with the work and methods of the best hospitals for the care of the insane might make a private sanatorium for those cases a great success.

A home for the reception of persons suffering from nervous prostration and allied nervous diseases would supply a want in some cities. Doctors would be glad to send their patients where they would have rest, suitable occupation,—sometimes as essential,—therapeutic baths, electricity, massage, or whatever treatment was prescribed away from the care and worry inevitable in the home life and equally far from the depressing influence of a body of nervous sufferers such as is met with in the larger sanatoriums.

A private hospital for children might be made successful when the field is large enough to insure a sufficient number of patients, and if under the auspices of an eminent surgeon would seldom be empty.

A hospital for chronic invalids, such cases as are either not re-

ceived into a general hospital or not retained there, would be remunerative when once it was fairly established. The occupants would remain for longer periods than acute cases, and there would be an element of stability and permanence about it which would render the financial question a less difficult problem to solve.

Food is coming more and more into prominence in the treatment of disease. The trained nurse who applies herself to the study of dietetics will find that there is an opening for her in this twentieth century upon which we are about to enter.

She may have charge of the diet kitchen in a hospital, where her personal knowledge of the dietary necessary for different forms of diseases would render her invaluable in training the nurses in this branch of the work.

As has been already done in one or two cases, she might open a little shop where suitable and palatable food, broths, koumiss, gruels, chicken and beef jellies, light puddings, etc., could be obtained for invalids. To this she might add the preparation of sterilized milk and foods for infants, which would be welcome in many nurseries.

Patients suffering from diabetes, Bright's disease, or kindred disorders, or who for any reason were ordered a special diet by their physicians, would often be glad to send to a place where it could be prepared for them without disturbing the economy of their own kitchen or interfering with the convenience of the autocrat who reigns there. Mothers about to take young children on a long journey by land or sea would like to be able to order the thrice sterilized milk which would keep unspoilied until they reached their destination.

When nurses graduate from a training-school and take up private work they often find difficulty in procuring caps, aprons, neckerchiefs, and uniforms suited to their requirements. They have little time for sewing and less time for shopping, and the materials they need are not always easy to obtain. A shop for the sale of these things, managed by a nurse familiar with the requirements of nurses, would be a profitable opening for a nurse who for any reason was unable to do the more active work of her profession. She might add to this the preparation of bandages and surgical dressings, obstetrical pads and napkins, infants' napkins and sanitary squares, sanitary towels, oakum pads for cases where there is incontinence of urine, sheepskin pads for the prevention of bedsores, rings for the support of heels and elbows of bedridden patients, who are without the attendance of a trained nurse, to keep the parts in good condition.

The nurse who engages in one of these business enterprises must conduct it in a business-like manner, or failure is certain. Some knowledge of bookkeeping is desirable, but whether she possesses this or not

the exact balancing of income and outgo is not to be dispensed with. The utmost promptitude in meeting engagements, the exact fulfilment of every contract, fair and just dealing with all who are brought into business relations with her, are indispensable to success.

Florence Nightingale remarked to me last summer that it had been said to her that, as she had founded trained nursing, so she must now reform it.

Is it true that we nurses as a body have lost something of that spirit of self-devotion to the needs of others which was the mainspring of our order in its beginning?

Do we think too much of our rights and too little of our duties?

Is service no longer the motive of our lives?

All about us is suffering humanity; we have been trained, we believe, in the best ways of alleviating that portion of the suffering that comes from disease or injury to the mortal body that is heir to pain.

Do we consecrate all our powers to this object?

When a nurse says either to herself or to others, "It is not my place to do such and such a thing for my patient," she at once falls below the high standard of our profession.

Whatever in the smallest degree can conduce to the comfort and well-being of the sick in her care, that it is not only her "place," but her bounden duty, to do without thought of self.

The nurse owes to the community the same faithful service that is given to it by the conscientious physician. It is by this earnest devotion to duty that we must raise our calling in the eyes of the world. Better far than any claim that we can make for it will be its own claim to respect when a trained nurse is a synonym for absolute faithfulness and perfect self-forgetfulness.

It is for us older nurses who have borne the burden of the years that have moulded our calling into a profession to hold up this high ideal to the younger women who are entering upon the work.

There is no lack of enthusiasm, as is shown by the response when war called for the services of nurses in the field. Cuba and South Africa have seen something of the same brave spirit that shone on the battle-fields of the Crimea. In every-day life, in the training-school and the sick-room, this enthusiasm is latent; it is our part to rouse and guide it aright.

Is there not an opening for nurses in a return to these earlier ideals? In a crucifixion of that mercenary spirit that asks "How much money will this case bring in?" "What will it mean in material advancement?" and substitutes for it that of Him who came not to be ministered unto, but to minister, and who said, "I am among you as one who serveth"?